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TO: Mail Stop: AMENDMENT
Examiner: J. Davis
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

FROM: Douglas P. Mueller

OUR REF: 10873.1686USWO

TELEPHONE: (612) 455.3800

Total pages, including cover letter: 47

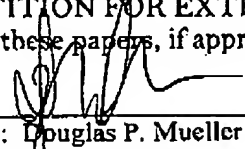
PTO FAX NUMBER: 571.273.8300

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Title of Document: Information Disclosure Statement, Form 1449, 2 references

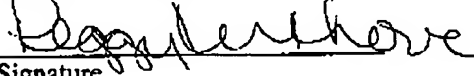
Applicant: MATSUDA, et al.
Serial No.: 10/536,590
App. Filed: May 26, 2005
Group Art No.: 1771
Confirmation No.: 9228

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MATSUDA, et al.

Examiner: J. Davis

MAR 13 2007

Serial No.: 10/536590

Group Art Unit: 1771

Filed: May 26, 2005

Docket: 10873.1686USWO

Title: MEDICAL FILM

CERTIFICATE UNDER 37 CFR 1.6(d): I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on March 13, 2007.

By: 

Name: Peggy Kerkhove

INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

With regard to the above-identified application, the items of information listed on the enclosed Form 1449 are brought to the attention of the Examiner. Copies of any foreign patent documents or "Other Documents" are enclosed.

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed (CHECK ONE):

- ☐ (1) within three (3) months of the Filing Date, before the mailing date of a First Office Action on the merits, or before the mailing date of a First Office Action on the merits after the filing of a request for continued examination under 37 C.F.R. §1.114; or
- ☒ (2) after the period defined in (1) but before the mailing date of a Final Rejection or Notice of Allowance, and
- ☐ the requisite Statement is below, OR
- ☒ the requisite fee of \$180.00 under Rule 1.17(p) is included herein, or
- ☐ (3) after the mailing date of a Final Rejection or Notice of Allowance but on or before the payment of the Issue Fee, AND the requisite Statement is below AND the requisite fee of \$180.00 under Rule 1.17(p) is included herein.

03/14/2007 TL0111 00000074 503478 10536590

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STATEMENT

Applicants hereby state that:

- ☐ Each item of information contained in the Information Disclosure Statement was first cited in a communication from a foreign patent office in a counterpart application or by the USPTO in a related application not more than three months prior to the filing date of the Information Disclosure Statement

- ☐ If this box is checked, Applicant provides the following:

Certification Under 37 C.F.R. §1.704(d)

In accordance with 37 C.F.R. §1.704(d), the undersigned hereby certifies that each item listed on the enclosed Form 1449 was first cited in a communication from a foreign patent office in a counterpart application, and that this communication was not received by any individual designated in 37 C.F.R. §1.56(c) more than thirty (30) days prior to the filing of this Information Disclosure Statement.

- ☐ The Examiner is hereby advised of the following co-pending U.S. applications. A copy of each U.S. patent application publication (if published) or application (if not published) is enclosed.

<u>Application No.</u>	<u>Publication No.</u>	<u>Filing Date</u>	<u>Group</u>
10/480,744	2004/0137179	December 11, 2003	1771

No representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§ 102 and 103 and Applicants reserve the right, pursuant to 37 C.F.R. § 1.131 or otherwise, to establish that the reference(s) are not "prior art." Moreover, Applicants do not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form 1449, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

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FEE AUTHORIZATION

Should any fee associated with the submission of this paper not be attached hereto as a check, the Commissioner is authorized to charge the missing fee to our Deposit Account, No. 50-3478. Any overpayments should be credited to said Deposit Account.

Respectfully submitted,

HAMRE, SCHUMANN, MUELLER &
LARSON, P.C.
P.O. Box 2902-0902
Minneapolis, MN 55402-0902
(612) 455-3800

Dated: March 13, 2007

By: 

Douglas P. Mueller
Reg. No. 30,300

DPM/pjk



MAR 13 2007

Date Mailed: March 13, 2007

Sheet 1 of 1

FORM 1449* INFORMATION DISCLOSURE STATEMENT IN AN APPLICATION (Use several sheets if necessary)	Docket Number: 10873.1686USWO	Application Number: 10/536,590
	Applicant: MATSUDA, et al.	
	Filing Date: May 26, 2005	Group Art Unit: 1771

[illegible]

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PATENT TRADEMARK OFFICE

EXAMINER	DATE CONSIDERED
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form for next communication to the Applicant.	